

IN THE SUPREME COURT OF THE STATE OF ARIZONA

In the Matter of:

ADOPTION OF AND
AUTHORIZATION TO MODIFY
THE JUVENILE REFERRAL FORMS

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Administrative Order
No. 2020 - 31

Pursuant to Rule 22(A), Rules of Procedure for the Juvenile Court, “any referral of incorrigible or delinquent conduct filed by an individual or agency shall be in writing, signed by the person responsible for the filing.”

The Administrative Office of the Courts, Arizona Supreme Court, has provided the Arizona Department of Public Safety with referral forms to distribute to local law enforcement agencies. Recently, the Juvenile Justice Services Division (JJSD) made modifications to the Juvenile Referral Form, including an electronic fillable version, and requests adoption of the revised forms.

JJSD has also requested that the Administrative Director of the Courts be authorized to approve all further revisions to the Juvenile Referral Forms through an Administrative Directive.

Therefore, pursuant to Article VI, Section 3, of the Arizona Constitution,

IT IS ORDERED adopting the Juvenile Referral Forms (Exhibits A and B attached and incorporated) for any referral of incorrigible or delinquent conduct filed by an individual or agency.

IT IS FURTHER ORDERED that the Director of the Administrative Office of the Courts be given the authority to approve all revisions to the Juvenile Referral Forms through an Administrative Directive.

Dated this 12th day of February, 2020.

ROBERT BRUTINEL
Chief Justice

EXHIBIT A

Multipart paper copy

IN THE SUPERIOR COURT OF THE STATE OF ARIZONA
 COUNTY, JUVENILE DIVISION

JUVENILE REFERRAL

PAGE ONE OF

LAST NAME			FIRST		MIDDLE		RACE		ETHNICITY			GENDER		AGE	
A.K.A.				SOCIAL SECURITY NUMBER (SSN)				BIRTH DATE (DOB)			JUVENILE EMAIL				
HEIGHT		WEIGHT		HAIR		EYES		SCARS, MARKS, TATTOOS			JUVENILES SOCIAL MEDIA HANDLE				
HOME ADDRESS – CITY AND ZIP CODE						MAILING ADDRESS – CITY AND ZIP CODE						INTERPRETER NEEDED NO YES LANGUAGE			
JUVENILE RESIDES WITH (FULL NAME; IF DIFFERENT FROM PARENT)						RELATIONSHIP						PARENT/GUARDIAN EMAIL			
PARENTS/GUARDIAN								HOW WERE PARENTS/GUARDIAN NOTIFIED? OFFICER: DATE/TIME:							
PARENTS/GUARDIAN ADDRESS – CITY AND ZIP CODE (if different from home)									PARENTS PHONE (work/home/cell)			JUVENILE CELL PHONE			
JUVENILE RELEASED TO CUSTODY OF: (RELATIONSHIP/CONTACT #)						JUVENILE'S EMPLOYER			SCHOOL			GRADE			

OFFENSES

	DATE	TIME	OFFENSE DESCRIPTION	A.R.S.
1	POLICE REPORT #		CONNECT-UP REPORT #	OFFENSE LOCATION
	DATE	TIME	OFFENSE DESCRIPTION	A.R.S.
2	POLICE REPORT #		CONNECT-UP REPORT #	OFFENSE LOCATION
	DATE	TIME	OFFENSE DESCRIPTION	A.R.S.
3	POLICE REPORT #		CONNECT-UP REPORT #	OFFENSE LOCATION

ARREST LOCATION		PHYSICAL CONDITION OF JUVENILE	
IS THE VICTIMS' RIGHTS REQUEST/WAIVER FORM ATTACHED? YES _____ NO _____		CO-DEFENDANT NAMES	
DID VICTIM REQUEST HIS/HER RIGHTS? YES _____ NO _____			

DETAILS OF OFFENSE(S) (ATTACH WRITTEN REPORT WITH COMPLETE DETAILS AND AFFIDAVIT OF PROBABLE CAUSE IF DETENTION IS REQUESTED)

- _____ (1) THAT OTHERWISE THE JUVENILE WILL NOT BE PRESENT AT ANY HEARING; OR
 _____ (2) THAT THE JUVENILE IS LIKELY TO COMMIT AN OFFENSE INJURIOUS TO SELF OR OTHERS; OR
 _____ (3) THAT THE JUVENILE MUST BE HELD FOR ANOTHER JURISDICTION; OR
 _____ (4) THAT THE INTEREST OF THE JUVENILE OR THE PUBLIC REQUIRE CUSTODIAL PROTECTION; OR
 _____ (5) THAT THE JUVENILE MUST BE HELD PENDING THE FILING OF A COMPLAINT PURSUANT TO A.R.S. §13-501.

EXPLANATION:

REFERRING AGENCY	ORI AZ	DATE OF REFERRAL
NAME OF COMPLAINANT- (OFFICER)	OFFICER I.D.	SIGNATURE OF COMPLAINANT- (OFFICER)
REFERRAL RECEIPT DATE:	INTAKE DISPO DATE:	SWID NUMBER

PAGE TWO OF TWO

LAST NAME	FIRST	MIDDLE	RACE	ETHNICITY	GENDER	AGE
A.K.A.		SOCIAL SECURITY NUMBER (SSN)		BIRTH DATE (DOB)	EMAIL	
OFFENSES						
4	DATE	TIME	OFFENSE DESCRIPTION		A.R.S.	
	POLICE REPORT #		CONNECT-UP REPORT #		OFFENSE LOCATION	
5	DATE	TIME	OFFENSE DESCRIPTION		A.R.S.	
	POLICE REPORT #		CONNECT-UP REPORT #		OFFENSE LOCATION	
6	DATE	TIME	OFFENSE DESCRIPTION		A.R.S.	
	POLICE REPORT #		CONNECT-UP REPORT #		OFFENSE LOCATION	
7	DATE	TIME	OFFENSE DESCRIPTION		A.R.S.	
	POLICE REPORT #		CONNECT-UP REPORT #		OFFENSE LOCATION	
8	DATE	TIME	OFFENSE DESCRIPTION		A.R.S.	
	POLICE REPORT #		CONNECT-UP REPORT #		OFFENSE LOCATION	
9	DATE	TIME	OFFENSE DESCRIPTION		A.R.S.	
	POLICE REPORT #		CONNECT-UP REPORT #		OFFENSE LOCATION	
10	DATE	TIME	OFFENSE DESCRIPTION		A.R.S.	
	POLICE REPORT #		CONNECT-UP REPORT #		OFFENSE LOCATION	
11	DATE	TIME	OFFENSE DESCRIPTION		A.R.S.	
	POLICE REPORT #		CONNECT-UP REPORT #		OFFENSE LOCATION	

12	DATE	TIME	OFFENSE DESCRIPTION	A.R.S.
	POLICE REPORT #		CONNECT-UP REPORT #	OFFENSE LOCATION
13	DATE	TIME	OFFENSE DESCRIPTION	A.R.S.
	POLICE REPORT #		CONNECT-UP REPORT #	OFFENSE LOCATION
14	DATE	TIME	OFFENSE DESCRIPTION	A.R.S.
	POLICE REPORT #		CONNECT-UP REPORT #	OFFENSE LOCATION

EXHIBIT B

Fillable PDF

IN THE SUPERIOR COURT OF THE STATE OF ARIZONA
 COUNTY, JUVENILE DIVISION
JUVENILE REFERRAL

JUVENILE INFORMATION

County:

Last Name	First	Middle	Social Security Number (SSN)	Birth Date (DOB)	Age	Gender
Home Address	City	State	Zip	Cell Phone	E-Mail	
Mailing Address - (If different)	City	State	Zip	Height	Weight	Eyes
Race	Ethnicity	Preferred Language	Interpreter Needed?		A.K.A.	
			Yes <input type="radio"/> No <input type="radio"/>			
Juvenile's Social Media Handle	Scars, Marks, Tattoos		Employer		School	Grade

PARENT/GUARDIAN INFORMATION

Parents/Guardian Name				How Were Parents/Guardian Notified?	
Parent/Guardian Address	City	State	Zip	Phone	E-Mail
Juvenile Resides With (Full Name; If Different from Parent)			Relationship	Juvenile Released to Custody of: (Relationship/Contact #)	

OFFENSES

1	Date	Time	Offense Description		
	A.R.S.	Police Report #	Connect-Up Report #	Offense Location	

Add 2nd Offense

Arrest Location	Physical Condition of Juvenile

Is the Victim's Rights Request/Waiver form attached? ☐ Yes ☐ No Co-Defendant Names

Did Victim Request His/Her Rights? ☐ Yes ☐ No

Details of Offense(s) (Attach written report with complete details and Affidavit of Probable Cause if Detention is requested)

IF DETENTION IS REQUESTED, STATE REASON-SEE RULE 23.D. ARIZONA RULES OF PROCEDURE FOR JUVENILE COURT

- ☐ (1) That otherwise the juvenile will not be present at any hearing; OR
- ☐ (2) That the juvenile is likely to commit an offense injurious to self or others; OR
- ☐ (3) That the juvenile must be held for another jurisdiction; OR
- ☐ (4) That the interest of the juvenile or the public require custodial protection; OR
- ☐ (5) That the juvenile must be held pending the filing of a complaint pursuant to A.R.S. 13-501

EXPLANATION:

Date of Referral	Referring Agency	ORI AZ	Name of Complainant - (Officer)	Officer I.D.
Signature of Complainant - (Officer)		Intake/Dispo Date	Referral Receipt Date:	SWID Number